PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block | for any change of address)

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional papers, such as an assignment or formal drawing, must

ARENT FOX I 1050 CONNECT SUITE 400 WASHINGTON	.LP TICUT AVENUE, I	necession and the second and the sec		Cer ereby certify that these Postal Service v tressed to the Mai asmitted to the USP	rtificate us Fee(s with suf I Stop TO (37	ling or transmission. of Mailing or Transm s) Transmittal is being ficient postage for first ISSUE FEE address a 1) 273-2885, on the dat	deposited with the United class mail in an envelope bove, or being facsimile e indicated below. (Depositor's assues) (Signature) (Date)
10/813.132 03/31/2004			Satoshi Aoyagi		107439-00112 3723		
TITLE OF INVENTION	CONTROL DEVICE I	FOR STARTING FUFL.	CELL VEHICLE				
APPLN. TYPE	SMALL, ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	EFEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0 \$1810 09/01/2010		09/01/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS	S			
WILLS, MONIQUE M		1795	429-023000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 required potent attorneys. I ARENT FOX LLP				
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
Tee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNCE NAME AS			· ·		•		
PLEASE NOTE: Unle recordation as set forth	ess an assignce is ident viu 37 CFR 3.11. Com	ified below, no assignce detion of this form is NO	data will appear on the p T a substitute for filing an	oatent. If an assign assignment.	ee is id	entified below, the doc	sument has been filed for
(A) NAME OF ASSIC HONDA GIKE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
KABUSHIKI KAISHA TOKYO, JAPAN							
Please check the appropri	ate assignee category or	categories (will not be pa	rinted on the patent): \Box	Individual 🛛 Co	orporati	on or other private grou	pentity Q Government
X Issue Fee X Publication Fee (No small entity discount permitted) Advance Order - # of Copies 10			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-2300 (enclose an extra copy of this form).				
5. Change in Entity Stat	us (from status indicated SMALL/ENTITY statt		☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
		d from anyone other than the applicant; a registered attorney or agent; or the assigner or other party in Office.					
interest as shown by the re	ecords of the Inited Sta	ty's Patent and Trademark	Office.		**********		
Authorized Signature	MC	Date August 30, 2010					
Typed or printed name	Murat Ozga	Registration No. 44, 275					
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231 Under the Paperwork Red	ality is governed by 35- application form to the ons for reducing this but rginia 22313-1450. DC 3-1450.	USC: 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	1 14. This collection is estable depending upon the indi- e Chief Information Offic COMPLETED FORMS T	finated to take 12 i vidual case. Any co er, U.S. Patent and O THIS ADDRESS	minutes omnents Tradem 5. SEND	to complete, including s on the amount of time sark Office, U.S. Depart DTO: Commissioner for	gathering, preparing, and cyou require to complete timent of Commerce, P.O. r Patents, P.O. Box 1450,